FE5AN018

## **FEC**

## **REPORT OF RECEIPTS AND DISBURSEMENTS**

140CT 27 PH 2: 03

FORM 3	For An Authorized Committee					Office Use Only	
NAME OF COMMITTEE (in full)	TYPE OR PRIN	IT ♥	Example: If over the lin	typing, type es.	12FE4M5		
Friends of Colonel Rob	Maness					1	
	1 1 1 1						
ADDRESS (number and street)	1 1 1 1						
Check if different							
than previously reported. (ACC)	MADISONVIL					70447	
2. FEC IDENTIFICATION NU	IMBER ♥	CITY	<b>A</b>		STATE	ZIP CODE	
C C00545285		3. IS THIS		NEW (N) OR	AMEND (A)	STATE ▼ DISTRICT	
4. TYPE OF REPORT (Cho (a) Quarterly Reports:	ose One)	(b) 12-Day	PRE-Election	Report for the	9:		
April 15 Quarterly Report (Q1)			Primary	,	X General (1		
July 15 Quarterly Report (Q2)			Conven	ion (12C)	Special (12	2S)	
October 15 Quarterly Report (Q3)		Election	4.4	M 0 0	2014	in the LA State of	
January 31 Year-End Report (YE)		(c) 30-Day	POST-Election	Report for t	he:		
			General	(30G)	Runoff (30	R) Special (30S)	
Termination Report (TER)		Election		<b>M</b> / D	Y	in the State of	
5. Covering Period 10	4 D D	ý ý 2014	throu	ogh 1	м / b b 0 15	y 2014	
I certify that I have examined this	Report and to	the best of m	y knowledge	and belief it is	s true, correct and	complete.	
Type or Print Name of Treasurer Signature of Treasurer  Dan B	Dan Backer				M M 10	D D Y Y Y 2014	
NOTE: Submission of false, erroned	<u>-                              </u>	ete information r	nay subject the	person signir	ng this Report to the	e penalties of 2 U.S.C. §437g.	
Office Use Only						FEC FORM 3 (Revised 02/2003)	